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FROM: Peter J. Yim

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Number of pages with cover page:	6	
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**Comments:****PLEASE PROCESS THE ATTACHED.**Re: U.S. Patent Application No. 09/588,242  
For: DATA STORAGE SYSTEM AND PROCESS  
Our Ref: 24921-20245.00

Attached is the following:

1. Transmittal (1 page)
2. Fee Transmittal (in duplicate, 2 pages)
3. Petition for Extension of Time (1 page)
4. Notice of Appeal (1 page)

PTO/SB/21 (08-03)


Approved for use through 07/31/2008, OMB 0851-0031

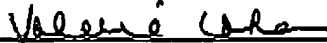
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/588,242	
	Filing Date	June 6, 2000	
	First Named Inventor	Lloyd A. POSTON	
	Art Unit	2186	
	Examiner Name	M. Anderson	
Total Number of Pages in This Submission	5	Attorney Docket Number	249212024500

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate, 2 pages)  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request (1 page)  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) (1 page)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Coversheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	MORRISON & FOERSTER LLP (Customer No. 20872) Peter J. Yim - 44,417
Signature	
Date	March 21, 2005

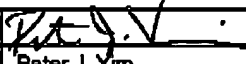
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-8306, on the date shown below.	
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sf-1898130

PTO/SB/17 (12-04v3)

Approved for use through 7/31/2006, OMB 0851-0032  
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Effective on 12/01/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known					
<b>FEE TRANSMITTAL</b>		Application Number	09/588,242				
<b>For FY 2005</b>		Filing Date	June 6, 2000				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Lloyd A. POSTON				
		Examiner Name	M. Anderson				
TOTAL AMOUNT OF PAYMENT (\$)		Art Unit	2188				
820.00		Attorney Docket No.	249212024500				
<b>METHOD OF PAYMENT</b> (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee					
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments					
<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES		Small Entity Fee (\$)					
Fee Description		Fee (\$)	Fee (\$)				
Each claim over 20 (including Reissues)		50	25				
Each independent claim over 3 (including Reissues)		200	100				
Multiple dependent claims		360	180				
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	
36	-36 = 0	x 50 =	0.00	360	0.00		
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
8	-8 = 0	x 200 =	0.00				
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 =	/50	(round up to a whole number) x					
	Fees Paid (\$)						
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1251 Extension for response within first month	120.00						
1401 Notice of appeal	500.00						
Signature		Registration No. (Attorney/Agent)	44,417	Telephone	(415) 268-6373		
Name (Print/Type)	Peter J. Yim	Date	March 21, 2005				

sf-1898089